

00862.003179

PATENT APPLICATION

#61A  
K DAVIS  
1-14-04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

in re Application of:

SATOSHI NISHIKAWA ET AL.

Application No.: 09/465,387

Filed: December 17, 1999

For: DATA PROCESSING APPARATUS  
ADAPTABLE TO PLURAL  
ENVIRONMENTS AND DATA  
PROCESSING METHOD

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Examiner: M.E. Wallerson  
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Art Unit: 2626  
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December 31, 2003

RECEIVED

JAN 02 2004

Technology Center 2600

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT AND PETITION FOR EXTENSION OF TIME

Sir:

Applicants petition to extend the time for response to the Office Action dated September 2, 2003, to and including January 2, 2004. Please charge the amount of \$110.00 for payment of the extension fee (and credit any overpayment) to Deposit Account 06-1205.

In response to that Office Action, the Examiner is respectfully requested to amend the above-identified application as follows:



2626

In re Application of:

SATOSHI NISHIKAWA ET AL.

Application No.: 09/465,387

Filed: December 17, 1999

For: DATA PROCESSING APPARATUS ADAPTABLE  
TO PLURAL ENVIRONMENTS AND DATA  
PROCESSING METHOD

Docket No. 00862.003179

Examiner: M.E. Wallerson

Group Art Unit: 2626

Date: December 31, 2003

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

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No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 24	MINUS	** 31	= 0	x \$9 \$18	0
INDEP. CLAIMS	* 6	MINUS	*** 6	= 0	x \$43 \$86	0
Fee for Multiple Dependent claims \$145°/\$290						0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

Verified Statement claiming small entity status is enclosed, if not filed previously.

A check in the amount of \$\_\_\_\_\_ is enclosed.

Charge \$110.00 to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

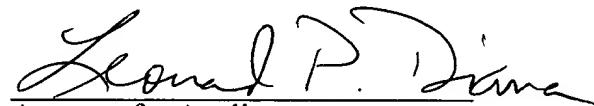
Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

A check in the amount of \$\_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.

A check in the amount of \$\_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.

Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
\_\_\_\_\_  
Attorney for Applicants  
Registration No. 29286

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New York, New York 10112-3801  
Facsimile: (212) 218-2200